

**UNITED STATES OF AMERICA  
BEFORE THE NATIONAL LABOR RELATIONS BOARD**

GREATER CHESAPEAKE & POTOMAC  
REGION OF THE AMERICAN RED CROSS<sup>1/</sup>

Employer

and

TEAMSTERS LOCAL UNION NO. 311, INTERNATIONAL  
BROTHERHOOD OF TEAMSTERS, AFL-CIO

Petitioner

**Case 5-RC-15047**

**DECISION AND DIRECTION OF ELECTION**

Upon a petition duly filed under Section 9(c) of the National Labor Relations Act, as amended, a hearing was held before a hearing officer of the National Labor Relations Board; hereinafter referred to as the Board.

Pursuant to the provisions of Section 3(b) of the Act, the Board has delegated its authority in this proceeding to the undersigned.

Upon the entire record in this proceeding, the undersigned finds:

1. The hearing officer's rulings made at the hearing are free from prejudicial error and are hereby affirmed.
2. The Employer is engaged in commerce within the meaning of the Act and it will effectuate the purposes of the Act to assert jurisdiction herein.<sup>2/</sup>
3. The Petitioner involved claims to represent certain employees of the Employer.
4. A question affecting commerce exists concerning the representation of certain employees of the Employer within the meaning of Section 9(c)(1) and Section 2(6) and (7) of the Act.
5. The following employees of the Employer constitute a unit appropriate for the purpose of collective bargaining within the meaning of Section 9(b) of the Act:<sup>3/</sup>

All full-time and regular part-time component laboratory technical assistants, donor testing laboratory technical assistants, donor testing laboratory lab technologists, reference lab technologists, apheresis lab technicians and apheresis lab technologists employed by the Employer at its Baltimore, Maryland facility, excluding the clerical assistant, administrative coordinator and quality control specialist in the component laboratory; the education coordinator in the donor testing laboratory; all hospital services employees, all data management employees, light duty vehicle drivers, guards, assistant supervisors and supervisors as defined in the Act.

**DIRECTION OF ELECTION**

An Election by secret ballot shall be conducted by the undersigned among the employees in the unit(s) found appropriate at the time and place set forth in the notice of election to be issued subsequently, subject to the Board's Rules and Regulations. Eligible to vote are those in the unit(s) who were employed during the payroll period ending immediately preceding the date of this Decision, including employees who did not work during that period because they were ill, on vacation, or temporarily laid off. Also eligible are employees engaged in an

economic strike that commenced less than 12 months before the election date and who retained their status as such during the eligibility period and their replacements. Those in the military services of the United States may vote if they appear in person at the polls. Ineligible to vote are employees who have quit or been discharged for cause since the designated payroll period, striking employees who have been discharged for cause since the strike began and who have not been rehired or reinstated before the election date, and employees engaged in an economic strike that began more than 12 months before the election date and who have been permanently replaced. Those eligible shall vote whether or not they desire to be represented for collective-bargaining purposes by

**TEAMSTERS LOCAL UNION NO. 311,  
INTERNATIONAL BROTHERHOOD OF TEAMSTERS, AFL-CIO**

**LIST OF VOTERS**

To insure that all eligible voters have the opportunity to be informed of the issues in the exercise of their statutory right to vote, all parties to the election should have access to a list of voters and their addresses that may be used to communicate with them. *Excelsior Underwear, Inc.*, 156 NLRB 1236 (1966); *N.L.R.B. v. Wyman-Gordon Co.*, 394 U.S. 759 (1969). Accordingly, it is directed that an eligibility list containing the *full* names and addresses of all the eligible voters must be filed by the Employer with the Regional Director within 7 days from the date of this Decision. *North Macon Health Care Facility*, 315 NLRB 359 (1994). The Regional Director shall make the list available to all parties to the election. No extension of time to file the list shall be granted by the Regional Director except in extraordinary circumstances. Failure to comply with this requirement shall be grounds for setting aside the election whenever proper objections are filed.

Your attention is directed to Section 103.20 of the Board's Rules and Regulations, a copy of which is enclosed. Section 103.20 provides that the Employer must post the Board's official Notice of Election at least three full working days before the election, excluding Saturdays and Sundays, and that its failure to do so shall be grounds for setting aside the election whenever proper and timely objections are filed.

**RIGHT TO REQUEST REVIEW**

Under the provisions of Section 102.67 of the Board's Rules and Regulations, a request for review of this Decision may be filed with the National Labor Relations Board, addressed to the Executive Secretary, 1099 14th Street, NW, Washington, D.C. 20570-0001. The request must be received by the Board in Washington by **AUGUST 30, 2000.**

Dated August 16, 2000

at Baltimore, Maryland

/s/ ALBERT W. PALEWICZ  
Acting Regional Director, Region 5



1/ The name of the Employer appears as amended at the hearing.

2/ The parties stipulated that the Greater Chesapeake & Potomac Region of the American Red Cross, hereinafter referred to as the Employer, is a District of Columbia corporation with the office and place of business located in Baltimore, Maryland, where it is engaged in the collection and processing of blood and related materials for distribution to hospitals and other health-care providers. During the past 12 months, a representative period, the Employer received gross revenues in excess of \$250,000 and sold and shipped goods and services valued in excess of \$5000 directly to firms located outside the State of Maryland.

3/ The Petitioner seeks a unit of all full-time and regular part-time technical assistants (TAs) in the component laboratory, who are employed by the Employer at its Baltimore, Maryland facility, excluding medical technologists, medical laboratory technicians, office clerical employees, guards and supervisors as defined in the Act. The Petitioner estimates the size of this unit is approximately 50 employees.

The Employer seeks a broader unit, specifically all full-time and regular part-time employees of the component laboratory, donor testing laboratory, clinical services department, which includes the apheresis and reference labs, hospital services, data management and transportation department. The Employer estimates the size of this unit to be about 150 employees. The Employer filed a timely brief and the Petitioner made a closing argument, both of which have been duly considered.

Section 2(14) of the Act defines "health care institution (as) any hospital, convalescent hospital, health maintenance organization, health clinic, nursing home, extended care facility, or other institution devoted to the care of sick, infirm or aged persons." In cases where there is no indication that a blood bank performs activities other than the collection, processing and distribution of blood and blood products, the Board has found that the blood bank is not a health care institution within the meaning

of the Act. **Dane County American Red Cross**, 224 NLRB 323 (1976); **Green County American Red Cross**, 221 NLRB 776 (1975). In the present case, neither the Employer nor Petitioner presented evidence that the Employer performed activities other than those of a blood bank, and, thus, I find that the Employer is not a health care institution within the meaning of the Act. Based upon this finding, I will apply the community of interest test to determine an appropriate unit herein.

The parties stipulated that all employees sought by the Petitioner as well as the broader unit sought by the Employer receive the same fringe benefits, including health insurance, vacation, sick leave and holidays. Furthermore, these employees share the same common facilities, including cafeteria, restrooms, parking lot and locker rooms. Additionally, all the employees, except for the light duty vehicle drivers, work on the same floor of the Employer's facility. The Employer's handbook applies to all employees. The employees who work in the following areas wear lab coats and gloves: component lab, reference lab, donor testing lab, hospital services and clinical services. Employees in data management and transportation do not wear these items. The employees in dispute are paid between grades 10 and 18. Specifically, the grade pay ranges are grade 10 -- \$13,000 to \$20,313; grade 12 -- \$16,307 to \$25,480; grade 13 -- \$18,264 to \$28,538; grade 14 -- \$20,456 to \$31,962; grade 15 -- \$22,910 to \$35,798; grade 16 -- \$25,660 to \$40,094; grade 17 -- \$28,739 to \$44,905; and grade 18 -- \$32,188 to \$50,293.

At present, Janis Smith, the Director of laboratory and hospital services supervises all of the departments and labs sought by the Employer, specifically clinical services, donor testing lab, component lab, hospital services and transportation except data management, which in July 2000, was moved so that its Manager, Denise Carroll, does not report to Smith. Each of the above departments or labs have their own Managers, who are Mary Beth Trich -- clinical services, Michelle Shraml -- donor testing lab, Sandy Poling -- component lab, Mike Greenwalt -- hospital services, and Jeffrey Zimmerman -- transportation. Previously, as of September 1999, Smith was the

Director of laboratory services, and, thus hospital services and transportation did not report to Smith; rather, they reported to Chris Chekouras, Manager of customer services.

The Employer's process starts with the collection of whole blood or apheresis components (explained below) from donors at various locations. (The collection employees involved in this process have their own bargaining unit, in which the Petitioner has represented them for the past 12 years.) The light duty vehicle drivers, from the transportation department, pickup the donated blood from these various sites, after the blood is packed by a phlebotomist or a mobile unit supervisor, and transport it back to the Employer's facility. The drivers take the donated blood, in ice chests/coolers and trunks, off the vehicles and bring it into the component lab, where it is received in the receipt and triage area. A component lab Technical Assistant (TA) checks the paperwork to verify the correct number of trunks and tubes within the coolers are listed, and signs off on its receipt. This process takes between one and five minutes. The TA puts an envelope of paperwork in a bin in the lab for the data entry operators, who are data management employees. They pick up the blood donation report (BDR) and enter this information into the computer system. Thereafter, the BDR reviewer in the data management office analyzes the information.

At this point, the TAs in the component laboratory (component lab) make the primary components from the donated blood -- red blood cells, plasma and platelets. The process begins with the placement of the blood onto a centrifuge, where either a hard or soft spin is conducted. A soft spin will make platelets while a hard spin will not. If making platelets, after the first spin, the TA removes the red cells and spins the remaining plasma in order to make the platelets. The next step is for the TA to go to the computer and "wand" (that is scan the bar code of) the various components. The platelets are recorded on a log and placed out for approximately one hour. Then, the platelets are put on an agitator (also called rotator) and placed in a freezer in the

component lab. After being frozen, the platelets are labeled in the component lab as to the type of blood.

If the blood is given one hard spin, the red blood cells are separated from the plasma. After the components are created and are entered into the computer through the "wand," the plasma is placed on racks in bins, frozen in one freezer and then moved to a large freezer, which is adjacent to the component lab. Later, after the test results are received, TAs label the components in the component lab for transfusion or shipment to a fractionator. If the products are for transfusions, then the component lab TA will take the products to hospital services inventory assistants, who verify the number of products and sign off. This interaction takes one to two minutes. Hospital services inventory assistants also come into the component lab to check on the process of the labeling on a daily basis. The products are put in their freezer until ready for shipment to a hospital by hospital services employees.

The tubes of blood which are initially delivered by the light duty vehicle drivers are picked up in the component lab by the donor testing laboratory technical assistants or taken by component TAs to the donor testing laboratory (donor testing lab). The donor testing lab technical assistants (TAs) enter the pertinent information into the computer database. Afterwards, the donor testing lab TAs pack the tubes in a blood transport box and deliver them to the loading dock, where a driver transports them to the National Testing Lab for further testing. After receipt of the lab testing information, a donor testing lab technologist retrieves the unsuitable components from the freezers and refrigerators in the component lab and quarantines them in a room next to the component lab. This occurs about five times daily.

The TAs in the component lab also take a segment of the blood to the reference lab for the reference lab technologists to perform sickle cell testing. After such testing, the reference lab technologist returns the blood to the component lab. On occasion, the

reference lab technologist will use a centrifuge in the component lab. The reference lab also receives quality control samples for testing from TAs in the component lab.

The apheresis components are also delivered by the light duty vehicle driver but are not processed by the TAs in the component lab. (Apheresis is a process in which the platelets are separated from the plasma in the donation, the plasma is returned to the donor and the concentrated platelets are collected as the donation. There are about 50 apheresis units delivered daily. Blood donations equal about 300,000 units a year.) The laboratory technicians from the apheresis lab go to the component lab at least seven times a day, and pick up these products for work in the apheresis lab (the reference laboratory and apheresis laboratory are jointly referred to as clinical services). The component lab TAs label and log the apheresis donations, before they are picked up.

There are approximately 50 TAs in **the component laboratory** along with approximately eight supervisors or assistant supervisors, who the parties have stipulated, are supervisors within the meaning of the Act. In order to be a TA in the component lab, one must possess a high school degree. The component lab TAs are paid at grade 14. Additionally, there are three other employees assigned to the component lab, a quality control specialist, a clerical assistant and an administrative coordinator. These three employees are required to have a high school diploma and are paid at grades 15 through 17. The clerical assistant works in the component lab with the TAs while the other two employees work in the administrative offices, which are near the component lab. The quality control specialist makes sure the thermometers, which are utilized in many departments, are properly calibrated and coordinates with vendors on the repair of centrifuges and other equipment. The clerical assistant organizes forms, required by the Food and Drug Administration (FDA), and prepares these forms to be moved to off-site storage. The administrative coordinator performs a variety of secretarial functions including payroll, ordering supplies, typing and mailing. Although the Petitioner has not sought to include these additional three employees

assigned to the component lab, it stated it would be willing to proceed to election if they were included in an appropriate bargaining unit.

The **donor testing laboratory** employs approximately seven lab technologists I, four TAs and an education coordinator. The TAs' main job is to manage the samples, which are being sent to the National Testing Lab, and to enter this information into a database. If tubes of blood are needed from the component lab, it is the TAs who go to the component lab to pick up the tubes. The donor testing lab technologists manage the test results which come back from the National Testing Lab and make sure that bad blood is retrieved from the component lab's freezers and refrigerators and quarantined, both physically and in the computer. The education coordinator keeps track of the training for all staff members employed by the Employer. This employee's office is located in the administrative office area. The education requirement for the TAs in donor testing and for the education coordinator is a high school diploma, while the donor testing lab technologists must possess at least a medical lab technology (MLT) degree, which is a two-year degree. The pay grades in donor testing are TA --14, lab technologist -- 16 and education coordinator -- 18.

**The reference laboratory**, which is within the clinical services department, employs seven or eight reference lab technologists. These employees perform quality control testing on specimens, platelet cross matching and anti-body screening, and other manufacturing procedures. They also relabel and create new components in the computer related to red cell freezing. The reference lab technologists must possess a medical technology (MT) degree, which is a four-year degree and are paid at grade 17.

**The apheresis laboratory**, which is also within the clinical services department, employs five lab technologists and two lab technicians. The lab technologists manufacture products related to the apheresis collections, perform quality control activities and determine the suitability of product from a single donor or multiple donors. In the process of performing these tests, they enter this information in the computer



database. Before receipt in the apheresis lab, the products are located in the component lab and the apheresis lab technologists must retrieve them. If the products cannot be located, the apheresis lab technologists speak to a component lab TA about where the samples are located. The apheresis lab technicians are involved in the stem cell processing, specifically making sure that excess volume plasma is removed in order to have the correct concentration of cells, quality control, and other specialized tasks. The apheresis lab technologists must possess a MT degree or equivalent certification and 2 years of blood bank experience, and are paid at grade 16. The apheresis lab technicians must have taken at least 60 hours of college level courses and are paid at grade 15.

**The hospital services department** employs the following: 20 inventory assistants, four technician I's, four technician II's, four customer service reps, two billing liaisons, an administrative assistant II, an inventory coordinator, a records management assistant and a quality control coordinator. The inventory assistants are responsible for taking orders from customers, by receiving tickets or answering the phone, entering the order into the computer system, packing the order and generating the shipping documents for delivery to the customer's hospital. The technicians I and II perform many of the same duties as the inventory assistants but handle more difficult or specialized types of orders, including those for apheresis products. The customer service reps talk to customers and take complaints from them. In emergency situations, they can also pack the products. The billing liaisons process fees for blood and testing as well as checking the correctness of the bills. The administrative assistant II performs many of the same duties as the administrative coordinator in the component lab, such as payroll, ordering supplies and general office management. The inventory coordinator coordinates and accounts for the inventory of blood products. The records management assistant keeps track of the necessary paperwork and is the individual who receives the paperwork from the component lab. The quality control coordinator keeps track of the central monitoring system for the Employer's whole operation, files deviations and gathers information related to customer service complaints. Of these

employees, only the tech II's, records management assistant and customer service reps have regular contact or interaction with the TAs in the component lab. All of the hospital services employees are merely required to possess a high school degree except tech II's, who are required to have a 2-year degree in health sciences. The record is incomplete as to the pay grades of all the hospital service employees except for the following: billing liaisons and tech I's – grade 14, tech II's and administrative assistant II--grade 15 and inventory coordinator, a salaried position – grade 16.

**The data management department** employs 3 job classifications: data entry operators, BDR (blood donor report) reviewers and a review clerk. The 11 or 12 data entry operators perform clerical functions, including checking the National Donor Registry database. The seven to eight BDR reviewers review the BDR and other information taken from the donor. The one review clerk handles payroll as well as other paperwork. The review clerk and data entry operators must possess a high school degree and are paid at grades 10 and 13, respectively. The BDR reviewers must possess a LPN (licensed practical nurse) degree and are paid at grade 13.

**The transportation department** employs 19 to 20 light duty vehicle drivers. Their job is to go to the sites where blood is being collected, pick up the blood and deliver it back to the Employer's facility. They must possess a high school diploma and are paid at grade 12.

About 5 or 6 TAs in **the component laboratory** have been promoted to lab technologists or lab technicians in clinical services. In order for the component lab employees to be eligible for the promotion, they must meet the higher job qualifications for lab technologists -- a MLT degree or its equivalent, or lab technicians -- 60 hours of college credits. Additionally, one component TA transferred to a technical assistant in donor testing, another transferred to a customer service rep and a third was promoted to a hospital services technician II position.

In determining an appropriate unit, the Board applies a community of interest analysis, wherein a number of factors are considered, including the similarity of duties, job qualifications, wages, benefits and working conditions, extent of interaction and interchange, organizational structure, functional integration of the business, history of collective bargaining, and the scope of the petitioned-for unit. **Kalamazoo Paper Box Corp.**, 136 NLRB 134 (1962).

The Employer asserts all of its operations are functionally integrated and all of the functions performed by its employees are interconnected in the Employer's manufacturing process. Moreover, the Employer asserts the petitioned-for unit is not a functionally distinct group; thus, it is not an appropriate unit. Although the record evidence demonstrates that all of the disputed employees play a role in the processing of blood products, this general statement does not necessarily prove functional integration. On the other hand, the type of work performed in the component lab is similar to work performed in the apheresis, reference and donor testing labs. All of these labs are processing and/or testing blood products.

Within the Employer's present organizational structure, the component lab is a separate department with its own manager, supervisors and assistant supervisors. The component lab reports to Smith, the director of laboratory and hospital services. Similarly, other departments in dispute, except data management, have their own managers, who report to Smith.

The duties of the TAs in the component lab are similar to the duties of the following employees: donor testing TAs and lab technologists, reference lab technologists and apheresis lab technicians and technologists. All of these employees are manufacturing blood products or testing blood. Although the employees in hospital services, transportation and data management handle blood or the accompanying paperwork, these employees do not manufacture blood products or test the blood. As a

result, these latter employees do not wear lab coats and gloves, which are required for lab employees.

As previously stated, all of the employees in dispute receive the same benefits, are under the same labor relations policies and work in the same facility, although the light duty vehicle drivers are away from the facility for most of their workday. Additionally, these employees use common parts of the facility, including the cafeteria, restrooms, locker rooms and parking lot. Thus, interaction of employees occurs on a regular basis in these common areas. As for other interaction, the record evidence shows that donor testing TAs have daily contact with the component lab TAs when picking up tubes of blood, apheresis lab technologists and technicians have daily contact with component lab TAs when retrieving apheresis products from the component lab, component lab TAs take samples to the reference lab and reference lab technologists use the centrifuges in the component lab. Thus, the above employees have daily interaction with each other. As previously described, some component TAs have been promoted to lab technicians or lab technologists in clinical services when they met the higher qualifications. The record evidence did not show any temporary transfers.

The qualifications for TAs in the component lab and donor testing are equal – a high school degree. In the apheresis lab, the lab technicians have slightly higher requirements – 60 hours of college credits while the lab technologists must have a MLT degree. The reference lab technologists are required to possess a MT degree.

The component lab TAs are paid at the grade 14 level -- \$20,500 to \$32,000. TAs in donor testing receive the same grade pay. Lab technicians and lab technologists in the donor testing and apheresis labs receive grade 15 or 16 pay, \$23,000 to \$36,000 and \$25,500 to \$40,000, respectively. The reference lab technologists are grade 17 -- \$28,750 to \$45,000. Thus, the pay for these positions overlaps depending on years of service and prior experience.

The record evidence shows that there is no history of collective bargaining in either the petitioned-for unit or the unit sought by the Employer. The Petitioner already represents the Employer's mobile unit employees in a separate appropriate unit.

Based upon the record evidence, I find the petitioned-for unit is not appropriate. Rather, I find an appropriate unit must include the donor testing laboratory TAs and lab technologists, the apheresis laboratory technicians and technologists and the reference lab technologists. These employees have a community of interest with the TAs in the component lab through the duties of their jobs – manufacture of blood products and test of blood and blood products, frequent interaction with each other, interchange, through the promotion of component TAs, similar pay scales and common uniform. Additionally, all these employees have the same benefits and are covered by the same labor relations policies. The somewhat different educational requirements among these positions are not enough to change their basic community of interest.

I find the **administrative coordinator** and **clerical assistant** in the component lab are **office clerical employees**. Specifically, their duties involve ensuring the proper paperwork is kept and filed, typing, mailing, ordering supplies and performing payroll. Thus, they do not share a community of interest with the TAs in the component lab and are **excluded** from the unit found appropriate. The **quality control specialist** also does not share a community of interest because this position is mainly a maintenance/administrative position, wherein the duties are to calibrate the thermometers and ensure proper maintenance is performed. Thus, the **quality control specialist** is **excluded** from the unit found appropriate. I also find the **education coordinator** does not share a community of interest with the appropriate unit found here. Although the education coordinator is technically assigned to the donor testing lab, this employee works in the administrative offices and is in charge of training all staff members. As such, this employee's duties are distinct from the duties of the employees

in the appropriate unit found, and, thus, this employee is **excluded** from the unit found appropriate.

I find the **light duty vehicle drivers** and **employees in hospital services and data management departments** are **excluded** from the unit found appropriate here. They do not share a community of interest with the TAs in the component lab and donor testing lab, apheresis lab techs and technologists, reference lab technologists and donor testing lab technologists. Specifically, the light duty vehicle drivers have a totally different type of job from that of the above named employees, and are away from the facility for almost all of each workday. The duties of the hospital services employees are distinct from the above named employees. They are primarily involved in receiving blood product orders, processing the appropriate paperwork with those orders and shipping those blood products. The data management department employees primarily enter the necessary paperwork related to the blood donors as well as review said paperwork. Although all of these jobs are required in order to properly perform work as a blood bank, the hospital services and data management department employees perform substantially different type of tasks from those performed by employees in the unit found appropriate herein.

In summary, I find that the following is an appropriate unit:

All full-time and regular part-time component laboratory technical assistants, donor testing laboratory technical assistants, donor testing laboratory lab technologists, reference lab technologists, apheresis lab technicians and apheresis lab technologists employed by the Employer at its Baltimore, Maryland facility, excluding the clerical assistant, administrative coordinator and quality control specialist in the component laboratory; the education coordinator in the donor testing laboratory; all hospital services employees, all data management employees, light duty vehicle drivers, guards, assistant supervisors and supervisors as defined in the Act.

The size of the unit found appropriate is approximately 70 employees. Since the unit found appropriate is significantly larger than the unit sought by the Petitioner, the Petitioner is granted 14 days to supplement its showing of interest herein, if necessary, or to withdraw the petition. Should the Union not wish to proceed to an election in the larger unit it will be permitted, upon request, to withdraw its petition without prejudice.

420-2963